

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

1027105

** May be used for additional claims or amendment.*

CLAIMS	JASPER		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51					
2							62					
3							53					
4							64					
5							55					
6							56					
7							57					
8	1						68					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
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42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep.	4						Total Indep.					
Total Depend	8						Total Depend					
Total Claims	12						Total Claims					